CIV-110

ATTORNEY OR PARTY WITHOUT ATTORNEY *(Name, State Bar number, and address)*:	FOR COURT USE ONLY
Ronald Roundy, CSB #276879 PHOENIX LAW GROUP CORP. 17772 IRVINE BLVD., STE. 203 TUSTIN, CA 92780 TELEPHONE NO.: 714/832-8780 FAX NO. *(Optional)*: 714/832-8592 E-MAIL ADDRESS *(Optional)*: ATTORNEY FOR *(Name)*: CREDIGY RECEIVABLES, INC.	ENDORSED FILED 2012 MAY 18 A 11: 03 David H. Yamasaki Clerk of the Superior Court County of Santa Clara, California By:_____ Deputy Clerk

SUPERIOR COURT OF CALIFORNIA, COUNTY OF SANTA CLARA
STREET ADDRESS: 191 N. FIRST STREET
MAILING ADDRESS:
CITY AND ZIP CODE: SAN JOSE, CA 95113
BRANCH NAME: DOWNTOWN SAN JOSE - UNLIMITED

PLAINTIFF/PETITIONER: CREDIGY RECEIVABLES, INC.

DEFENDANT/RESPONDENT: CORAZON GAERLAN REYES

REQUEST FOR DISMISSAL	CASE NUMBER:
[ ] **Personal Injury, Property Damage, or Wrongful Death** 　　[ ] Motor Vehicle [ ] Other [ ] **Family Law** [ ] **Eminent Domain** [✓] **Other** *(specify)*: OTHER PROPERTY	111CV213007

- A conformed copy will not be returned by the clerk unless a method of return is provided with the document. -

1. TO THE CLERK: Please **dismiss** this action as follows:

  a. (1) [ ] With prejudice   (2) [✓] Without prejudice

  b. (1) [ ] Complaint   (2) [ ] Petition
    (3) [ ] Cross-complaint filed by *(name)*:　　　　　　　　　　on *(date)*:
    (4) [ ] Cross-complaint filed by *(name)*:　　　　　　　　　　on *(date)*:
    (5) [✓] Entire action of all parties and all causes of action
    (6) [ ] Other *(specify)*:*

> **EXHIBIT**
> **13**
> tabbies
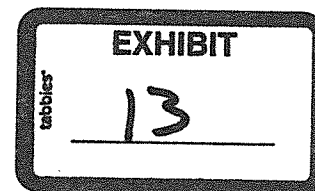
2. (Complete in all cases except family law cases.)

  [ ] Court fees and costs were waived for a party in this case. *(This information may be obtained from the clerk. If this box is checked, the declaration on the back of this form must be completed)*.

Date: 5/16/2012

RONALD ROUNDY
....
(TYPE OR PRINT NAME OF [✓] ATTORNEY [ ] PARTY WITHOUT ATTORNEY)

▶ _____
(SIGNATURE)

*If dismissal requested is of specified parties only of specified causes of action only, or of specified cross-complaints only, so state and identify the parties, causes of action, or cross-complaints to be dismissed.

Attorney or party without attorney for:
[✓] Plaintiff/Petitioner   [ ] Defendant/Respondent
[ ] Cross–Complainant

3. **TO THE CLERK:** Consent to the above dismissal is hereby given.**

  Date:

▶ _____
(SIGNATURE)

_____
(TYPE OR PRINT NAME OF [ ] ATTORNEY [ ] PARTY WITHOUT ATTORNEY)

** If a cross-complaint – or Response (Family Law) seeking affirmative relief – is on file, the attorney for cross-complainant (respondent) must sign this consent if required by Code of Civil Procedure section 581 (i) or (j).

Attorney or party without attorney for:
[ ] Plaintiff/Petitioner   [ ] Defendant/Respondent
[ ] Cross–Complainant

(To be completed by clerk)

4. [✓] Dismissal entered as requested on *(date)*: MAY 18 2012
5. [ ] Dismissal entered on *(date)*:　　　　　　as to only *(name)*:
6. [ ] Dismissal **not entered** as requested for the following reasons *(specify)*:　MAY 18 2012

7. a. [✓] Attorney or party without attorney notified on *(date)*:
  b. [ ] Attorney or party without attorney not notified. Filing party failed to provide
    [ ] a copy to be conformed   [ ] means to return conformed copy

Date: MAY 18 2012　　　　　Clerk, by_____, Deputy

Page 1 of 2

Form Adopted for Mandatory Use
Judicial Council of California
CIV-110 [Rev. July 1, 2009]

REQUEST FOR DISMISSAL

Code of Civil Procedure, § 581 et seq.;
Gov. Code, § 68637(c); Cal. Rules of Court, rule 3.1390
www.courtinfo.ca.gov
American LegalNet, Inc.
www.FormsWorkflow.com

CIV-110

PLAINTIFF/PETITIONER: CREDIGY RECEIVABLES, INC.	CASE NUMBER:
DEFENDANT/RESPONDENT: CORAZON GAERLAN REYES	111CV213007

Declaration Concerning Waived Court Fees

The court has a statutory lien for waived fees and costs on any recovery of $10,000 or more in value by settlement, compromise, arbitration award, mediation settlement, or other recovery. The court's lien must be paid before the court will dismiss the case.

1. The court waived fees and costs in this action for *(name)*:

2. The person in item 1 *(check one)*:
   a. ☐ is not recovering anything of value by this action.
   b. ☐ is recovering less than $10,000 in value by this action.
   c. ☐ is recovering $10,000 or more in value by this action. *(If item 2c is checked, item 3 must be completed.)*

3. ☐ All court fees and costs that were waived in this action have been paid to the court *(check one):* ☐ Yes ☐ No

I declare under penalty of perjury under the laws of the State of California that the information above is true and correct.

Date: _____

▶ _____

_____
(TYPE OR PRINT NAME OF ☐ ATTORNEY ☐ PARTY MAKING DECLARATION)

(SIGNATURE)

1

PROOF OF SERVICE

2   **(CODE OF CIVIL PROCEDURE, §§ 1011, 1013, 2015.5)**

3   **CALIFORNIA RULES OF COURT, RULE 2008(e)**

ENDORSED
FILED

2012 MAY 18 A 11: 03

4   STATE OF CALIFORNIA, COUNTY OF ORANGE

David H. Yamasaki, Clerk of the Superior Court
County of Santa Clara, California
By:
Deputy Clerk

5   I am employed in the County of Orange, State of California. I am over 18 years of age

6   and not a party to the within action; my business address is 17772 Irvine Blvd., Suite 203, Tustin, CA 92780.

7   On May 16, 2012, I served the foregoing document(s) described as:

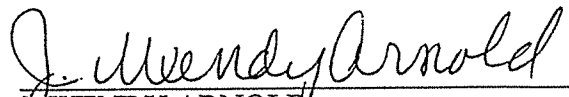8   REQUEST FOR DISMISSAL – ENTIRE ACTION

9   on the interested party(ies) in this action by placing a true and correct copy thereof enclosed in a sealed envelope addressed as follows:

10

11   Fred W. Schwinn
CONSUMER LAW CENTER,INC.
12 South First St., Suite 1014

12   San Jose, CA 95113-2418

13   **[x] BY MAIL:**   I deposited such envelope in the mail at Tustin, California. The envelope was mailed first-class with postage thereon fully prepaid.

14

15   Executed on May 16, 2012 at Tustin, California.

16   I declare under penalty of perjury under the laws of the State of California, that the foregoing is true and correct.

17

18

19   J. WENDY ARNOLD

20

21

22

23

24

25

26

27

28